H54686

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SEP 29 2016

C LEWIS

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: フナカノカベ	DAND PROPERTIES INC
NAME OF CORPORATION:	6
The enclosed Articles of Amendment and fee are submit	
	-
Please return all correspondence concerning this matter t	o the following:
<u>DANIEL</u>	F, DERR PRES.
	Firm/ Company
203 MELENCE	Auf
	Address
ORMOND BEAC	Address L FLP 32174 ity/ State and Zip Code
C	ity/ State and Zip Code
Famail address: (to be used for	or future annual report notification)
E-man address. (to be used in	in tuture aimual report notification)
For further information concerning this matter, please cal	11:
DANIEL F. DERR	at (<u>386)</u> <u>2994600</u> Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payal	ple to the Florida Department of State:
Certificate of Status	\$43.75 Filing Fee & Certificate of Status Additional copy is enclosed) \$\square \text{352.50 Filing Fee} \text{Certificate of Status} \text{Certified Copy} \text{(Additional Copy} \text{ is enclosed)}
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to
Articles of Incorporation

7.7/	1 A 1 P		·—
Name of	Corporation as currently fi	iled with the Florida Dept.	of State)
(<u>************************************</u>	HCUS	+/	
	(Document Number of C	arnamition (if known)	°
	(Document Number of Co	orporation (it known)	7
ursuant to the provisions of section 607.10 s Articles of Incorporation:	06, Florida Statutes, this Fla	orida Profit Corporation ado	pts the following amenda
. If amending name, enter the new nam	e of the corporation:		•
			The ne
Corp.," "Inc.," or Co.," or the designate ord "chartered," "professional association	n," or the abbreviation "P.A		on name must contain t
Enter new principal office address, if a Principal office address <u>MUST BE A STR</u>		,	
	•		
Enter new mailing address, if applica (Mailing address MAY BE A POST OF			
(Manning and CSS MATE DE AT CST CT	TICL BOX	· · · · · · · · · · · · · · · · · · ·	
	-		
			C 41
. If amending the registered agent and/o new registered agent and/or the new r		in Florida, enter the name	oi the
Name of New Registered Agent			, ,
<u> </u>	·		
·	(Florida street	address)	
New Registered Office Address:		, J	Florida
,	(Ci	ty)	(Zip Code)
		•	
ew Registered Agent's Signature, if char		and account the abliquations	of the monition
hereby accept the appointment as registere	u agent. I am Jamiliar with	i ana accepi ine obligations c	oj ine position.
	•	•	,
		,	
	Signature of New Pari	istored Agent if changing	

If amending the Officers and/or Directors, enter the title	and name of each officer/director being removed and title, name, and
address of each Officer and/or Director being added:	,

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT John Doe	•
X Remove	V <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address .
1) Change Add	V MAVIS CASH JONATHAN B. DERR	DRMOND BCh FLA
Remove	P.O. BOX 167 OWEGO N. Y. 13827	3217
2) _X Change _X AddRemove	S JONATHAN B. DERR MAUIS CASH 239 WILMETTE AVE DRMOND BCH FLH 32174	P.O. Box 167 Owego N.Y. 13827
3) Change Add Remove	URMOND BCH FLA SXITT	
4) Change Add Remove		
5) Change Add		· · · · · · · · · · · · · · · · · · ·
Remove 6) Change	·	
Add		

The date of each amendment(s) addate this document was signed.	option:	, if other than the
_	0-22-1/	
Effective date if applicable:	(no more than 90 days after amendment file date)	#************************************
Note: If the date inserted in this blodocument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date vartment of State's records.	vill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	· ·
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by	(voting group)	28 S
The amendment(s) was/were ador action was not required.	ted by the board of directors without shareholder action and shareholder	MISSEP 26
The amendment(s) was/were adoption was not required.	ted by the incorporators without shareholder action and shareholder	MII: 26
Dated9	-23-16	Ŏ
(By a dir selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)	
-	DANIEL F DERR (Typed or printed name of person signing)	· · · · · · · · · · · · · · · · · · ·
· -	PRISSI DENT (Title of person signing)	